Disclosure Re	Amendment Yes No									
Use this form for ge	eneral report and committee	informat	tion, must be si	igned and sub	mitted along with	other detailed forms.				
Do not use this form to update information										
1. Committee Info	rmation									
a. Full Name Kathy Mesel Heintel for BOE						c. ID Number				
	KJM234									
	clude City, State and Zip Code)					d. Date Filed				
904 Patricians Land Monroe, NC 28110										
MOHIOC, NC 20110	,					e. Phone Number				
	704-256-4807									
2. Report Year	3. Period Start Date (mm/s	dd/yy)	4. Period En (mm/dd/yy)	id Date	5. Treasurer Ful	5. Treasurer Full Name				
2018	07/01/18		10/20	0/18	Sarah W. May					
6. Type of Commit	tee (Check One)	9. Typ	oe of Report	(check onl	ly one type of repor	rt from one category)				
Candidate Camp	,	Munici	pal	State/Co		Referendum				
PAC Independent	Referendum		Organizational		Organizational	Organizational				
Independent Expenditure Legal Expense F	Joint Fundraiser		Thirty-five day		Quarterly	Pre-referendum				
7. Type of Fund	(if applicable, check one)		Pre-primary	lп	First	Final				
Booster Fund"	10 11	1 🗇	Pre-election		Second	Supplemental Final				
Building Fund	t our		Pre-runoff		Third	Annual				
			Semi-annual		Fourth	Special				
Other:		님	Mid Year	S	Semi-annual					
U Ouici.			Year End Final	ᅵ님	Mid Year Year End	10. Special Report Name				
8. Number of Fund	raisers this Report	lΗ	Special	_F	rear End	*				
			.		pecial					
11. Account Inform	nation		1	1. Account Ir						
a. Financial Institution l	Full Name				tution Full Name					
Bank of America					Name of A Chance Lond	-				
b. Purpose	c. Account Code		b.	. Purpose	EIVED	c. Account Code				
	KH	1		OCT	2 9 2018					
	d. Period Begin Balance			UCI	2 9 2010	d. Period Begin Balance				
				Union Co. Bo	pard of Elections					
	\$ 77.27			0111011 00. 50	yara or Elootiono	\$				
CERTIFICATION										
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report										
is complete, true and correct and that I have been trained by the NC State Board of Elections.										
	Printed Name of Signer	7	- Signa	ature of Appointe	d Transvers	Date				
FOR OFFICE USE O			Signa	nuic of Appointed	d Heasurer	Date				
Date Received:	10/29/18		Employee:	Hey	Po	Delivery Method Normal Mail				
Date Postmarked	d:		Employee:	1.		Registered Mail Hand Delivered				
Date Scanned:			Employee:			Electronically Filed Signer has not received				
Date Data Entere	ed:		Employee:			mandatory training				
Please Note: Thi	Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.									
	You must amend the Staten			52		tae changes				

Amendment

Amendment Yes \times No

Detailed SummaryUse this form to summarize all disclosure reporting forms and to total monetary information.

1. Committee Full Name (and Fund if applicable)	2. Type of Report		3. ID Number
Kathy Mesel Heintel for BOE	Third Quarter 201		KJM234
Start of Election Cycle: January 1,	2018	Total this Reporting Perio	Total this Election Cycle
4) Cash on Hand at Start		\$ 77.27	\$ 161.27
<u>RECEIPTS</u>			
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$
6) Contributions from Individuals	(CRO-1210)	\$	\$ 27.00
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$
9) Loan Proceeds	(CRO-1410)	\$	\$
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$
11) Other Receipt Sources			
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$
11b) Contributions from Not-for-Profit Organizat	ions <i>(CRO-1250)</i>	\$	\$
11c) Outside Sources of Income	(CRO-1250)	\$	\$
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 1	1c, 11d and 11e)	\$	\$ 27.00
<u>EXPENDITURES</u>			
13) Disbursements			
13a) Operating Expenditures	(CRO-1310)	\$ 56.00	\$ 140.00
13b) Contributions to Candidates/Political Commi	ittees (CRO-1310)	\$	\$
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$
15) Loan Repayments	(CRO-1420)	\$	\$
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$
17) In-Kind Contributions	(CRO-1510)	\$	\$ 27.00
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14,	15, 16 and 17)	\$ 56.00	\$ 167.00
19) Cash on Hand at End (Add lines 4 and 12 together, then su		\$ 21.27	\$ 21.27
ADDITIONAL INFORMATION		10 A	
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$	
21) Outstanding Loans (incl. ones from other campaig	(cro-1430)	\$	
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$	
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$	
24) Account Transfers Within the Committee	(CRO-1720)	\$	
25) Administrative Support	VED _(CRO-1710)	\$	\$
26) Forgiven Loans OCT 2 9		\$	\$
27) 40 Hann Nation Demonts Com-	(CDO 2220)	\$	\$
Union Co. Board o	500 E3 A1 A3 B		
28) Contributions to be Refunded	(CRO-1215)	\$	\$

		m Individuals ividual contributions	over \$5			of <u>1</u>	Yes Yes	No No
		(and Fund if applica	-	o or contributions at	ider \$50 II form C	2. ID Nu		
Kathy M	lesel Heintel for B	ОЕ					KJM234	
3. Conti	ributor Informati	on		Add 🔲 R	emove			
a. Full Name, Mailing Address & Phone			b. Job Title/Profession d. Comme			nts		
(include	e city, state, & zip)							
				c. Employer's Name/	Specific Field			
							79 min of the first of the firs	
					e. Election Sum to Date			
		-				\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-	Kind Description	j. Date (mm/dd/	уууу)	k. Amount	
							\$	
						2	\$	
							\$	
3. Contr	ibutor Informati	on		Add R	emove			
	me, Mailing Address	& Phone		b. Job Title/Professio	n	d. Commen	nts	
(include	e city, state, & zip)				*1			
				c. Employer's Name/S	c. Employer's Name/Specific Field			
				<i>/</i> =		e. Election	Sum to Date	
4						\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-l	Kind Description	j. Date (mm/dd/	уууу)	k. Amount	
							\$	
							\$	22
							\$	
3. Contr	ibutor Informati	on		Add R	emove			
	me, Mailing Address	& Phone		b. Job Title/Professio	n	d. Commen	its	
(include	city, state, & zip)	VED		-				
	RECEI	VLD		c. Employer's Name/S	Specific Field			-
	OCT 29	2018				- Florting	Same to Data	
	Union Co. Board o	f Elections					Sum to Date	
			1		·	\$		
f. Prior	g. Account Code	h. Form of Payment	i. In-I	Kind Description	j. Date (mm/dd/	уууу)	k. Amount	
ᆜ			-				\$	
							\$	
							\$	
4. Total only this Page						\$		0.00
	l of ALL CRO					\$		27.00
(This lin	e must be on line 6 of	Detailed Summary Page C	RO-1100)				

Contributions from Individuals

Amendment

Disbursements

Amendment \boxtimes Yes No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

Statis Mosel Helintel for BoE Style Ministry	1. Committee Full Name (and Fund if applicable)							2. ID Number	
Note			KJM234						
A. Full Name, Mailing Address & Phone Cinctude city, state, & sip) Bank of America Sp35 Weddington Road Wesley Chapel, NC 28104 E. Account Code R. Form of Payment B. Furpose Code A. Payee Information F. Account Code R. Form of Payment B. Furpose Code C. Level Registered (Specify) C. Level Registered (Specify) State B. County: State C. Level Registered (Specify) C. Level Registered (Specify) State C. Level Registered (Specify) C. Level Regist		nent.)							
Second Code Second Payment Second Code Second Payment Second Code Second C									
Glacitude city, state, & zip	4. Payee Inform	ation		Add		Remove			
Sank of America Sp35 Wedfulgion Road Wesley Chapel, NC 28104 Pederal County: Cetober 2018	a. Full Name, Maili	ng Address & Phone		b. Coordinated Comm	nittee Na	ame	d. Co	mments	
Sank of America Sp35 Wedfulgion Road Wesley Chapel, NC 28104 Pederal County: Cetober 2018	(include city, state,	& zip)					\$14	per month	
Substitute Care Registered (Specify)				1				*	
State	5935 Weddingto	on Road		c. Level Registered (Si	pecify)				
State	_			Federal County:			-		
S. 140.00 1. 1. 1. 1. 1. 1. 1.	,,	-11 = III. 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
				State		within cipality.	C. Ele	ction Sum to Date	
KH1							\$ 1	140.00	
KHI	f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyy	/y)	j. Amount	k. Re	quired Remarks	
A. Payee Information	KH1		K	07/01/18		\$			
A. Full Name, Mailing Address & Phone (Include city, state, & zip)	KH!		K	10/01/2018		\$56.00			
C. Level Registered (Specify) Federal County: C. Election Sum to Date State Municipality: C. Election Sum to Date State State Municipality: S. Election Sum to Date State Stat	4. Payee Inform	ation		Add		Remove			are union
c. Level Registered (Specify) Federal	a. Full Name, Mailii	ng Address & Phone		b. Coordinated Comm	ittee Na	ıme	d. Co	mments	
Federal County: Municipality: e. Election Sum to Date	(include city, state, &	& zip)							
Federal County: Municipality: e. Election Sum to Date			-1	1					
Federal County: Municipality: e. Election Sum to Date				c. Level Registered (Sp	pecify)				
State	"				Π	County:	7		
Saccount Code Remarks Security Secur							e Ele	ction Sum to Date	
F. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks						Wallerpairty.	C. Dic	ction built to Date	
KH1 K 08/01/18 \$14.00 4. Payee Information							\$		
4. Payee Information Add Remove a. Full Name, Mailing Address & Phone (include city, state, & zip) OCT 2 9 2018 C. Level Registered (Specify) DCT 2 9 2018 C. Level Registered (Specify) Federal County: State Municipality: c. Election Sum to Date State Municipality: c. Election Sum to Date State Municipality: c. Election Sum to Date State Stat	f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyy	y)	j. Amount	k. Re	quired Remarks	
A. Payee Information	KH1		K	08/01/18		\$14.00			
a. Full Name, Mailing Address & Phone (include city, state, & zip) C C V C C C V C Federal C C State Municipality: E State Municipality: E State Municipality: E State Municipality: E State				- Fe		\$		2	
C. Level Registered (Specify) C. Level Registered (Specify) Federal County: Municipality: C. Election Sum to Date State Municipality: State Municipality: C. Election Sum to Date State State Municipality: State State State State State Municipality: State Municipality: State	4. Payee Informa	Add		Remove			1000		
C. Level Registered (Specify) County: C. Election Sum to Date State Municipality: State Municipality: C. Election Sum to Date State Municipality:	a. Full Name, Mailir	ig Address & Phone		b. Coordinated Committee Name			d. Co	mments	
C. Level Registered (Specify) County: C. Election Sum to Date State Municipality: State Municipality: C. Election Sum to Date State Municipality:	(include city, state, &	k zip)							
OCT 2 9 2018 Federal	RE	CEIVED	\						
OCT 2 9 2018 Federal	1 1 1	.OLIVED	,	c. Level Registered (Specify)					
Union Co. Board of Elections State Municipality: c. Election Sum to Date Union Co. Board of Elections \$ f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks \$ 5. Total only this Page \$ 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) 7. Purpose Codes (List detailed expenditure code in (h.) above) A*- Media B*- Printing C*- Fundraising D- To Another Candidate F*- Equipment I- Postage J- Penalties K*- Office Expenses Q*- Donation to Legal Expense Fund O*- Other	And the second of the second of			Federal County:			7		
### Company Color Co							e. Election Sum to Date		INTEREST
f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount k. Required Remarks \$ 5. Total only this Page 5. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) 7. Purpose Codes (List detailed expenditure code in (h.) above) A*- Media B*- Printing C*- Fundraising D- To Another Candidate F*- Equipment G- Political Party H*- Holding Public Office Expenses O*- Other						municipality.	C. Life	ction Sum to Date	
\$ 5. Total only this Page 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) 7. Purpose Codes (List detailed expenditure code in (h.) above) A*-Media B*-Printing C*-Fundraising D-To Another Candidate E - Salaries F*-Equipment G-Political Party H*-Holding Public Office Expenses I - Postage J - Penalties K*-Office Expenses Q*-Donation to Legal Expense Fund	Union Co. Board of Elections					\$			
5. Total only this Page 5. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) 7. Purpose Codes (List detailed expenditure code in (h.) above) A*-Media B*-Printing C*-Fundraising D-To Another Candidate E - Salaries F*-Equipment G-Political Party H*-Holding Public Office Expenses I - Postage J - Penalties K*-Office Expenses Q*-Donation to Legal Expense Fund	f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyy	y)	j. Amount	k. Red	quired Remarks	
5. Total only this Page 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) 7. Purpose Codes (List detailed expenditure code in (h.) above) A*- Media B*- Printing C*- Fundraising D- To Another Candidate E - Salaries F*- Equipment G - Political Party H*- Holding Public Office Expenses I - Postage J - Penalties K*- Office Expenses Q*- Donation to Legal Expense Fund O*- Other						\$			
5. Total only this Page 6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) 7. Purpose Codes (List detailed expenditure code in (h.) above) A*- Media B*- Printing C*- Fundraising D- To Another Candidate E - Salaries F*- Equipment G - Political Party H*- Holding Public Office Expenses I - Postage J - Penalties K*- Office Expenses Q*- Donation to Legal Expense Fund O*- Other						\$	1		
6. Total of ALL CRO-1310 Pages (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) 7. Purpose Codes (List detailed expenditure code in (h.) above) A*-Media B*-Printing C*-Fundraising D-To Another Candidate E-Salaries F*-Equipment G-Political Party H*-Holding Public Office Expenses I-Postage J-Penalties K*-Office Expenses Q*-Donation to Legal Expense Fund O*-Other		D				_			
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) 7. Purpose Codes (List detailed expenditure code in (h.) above) A* - Media B* - Printing C* - Fundraising D - To Another Candidate E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund O* - Other							56.00		
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures) 7. Purpose Codes (List detailed expenditure code in (h.) above) A* - Media B* - Printing C* - Fundraising D - To Another Candidate E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses I - Postage J - Penalties K* - Office Expenses O* - Other		The second secon							
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7. Purpose Codes (List detailed expenditure code in (h.) above) A*-Media B*-Printing C*-Fundraising D-To Another Candidate E - Salaries F*-Equipment G-Political Party H*-Holding Public Office Expenses I - Postage J - Penalties K*-Office Expenses Q*-Donation to Legal Expense Fund O*-Other	(1 nis une goes in tine 136 of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)								
A* - Media B* - Printing C* - Fundraising D - To Another Candidate E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund									
E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expenses I - Postage J - Penalties K* - Office Expenses O* - Other H* - Holding Public Office Expenses Q* - Donation to Legal Expense Fund									
I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund O* - Other	THE PART OF THE PA								
O* - Other									
		J - renames	K" - Offic	e expenses		Q" - Donatio	on to Le	gai Expense Fund	

Amendment Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund. Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days. Yes \boxtimes No

1. Committee Full Name (and Fund if applicable)			2. ID	Number
Kathy Mesel Heintel for BOE	a	KJM234		
3. Contributor Information Add	Remove		S. Carrier	
a. Full Name, Mailing Address & Phone	b. Type of C	ontributor	c. Con	nments
(include city, state, & zip)		vidual		
	Cano	didate		
9	Party	/	ĺ	-
	PAC			
5	Refe	rendum	d. Elec	ction Sum to Date
#	Othe	er Receipt Source	\$	0
e. Description		f. Date (mm/dd/yyy		g. Fair Market Amount
c. Description		To Date (IIIII day)	3)	
				\$
				\$
				\$
3. Contributor Information Add	Remove			
a. Full Name, Mailing Address & Phone	b. Type of C		c. Con	nments
(include city, state, & zip)	Indiv	vidual		
		didate		
	Party			
	PAC		Selection and the selection of the selec	
		endum d. Election Sum to Date		ction Sum to Date
	Othe	er Receipt Source	\$	
e. Description		f. Date (mm/dd/yy	/y)	g. Fair Market Amount
		÷		\$
				\$
	=			\$
3. Contributor Information Add	Remove			
a. Full Name, Mailing Address & Phone	b. Type of C	Contributor	c. Con	nments
(include city, state, & zip)		vidual		
RECEIVED	Can	didate		
NEOLIVED	Party			
OCT 2 9 2018	PAC			
E-0-1	rendum	d. Election Sum to Date		
Union Co. Board of Elections	Othe	er Receipt Source	\$	
e. Description		f. Date (mm/dd/yy	/y)	g. Fair Market Amount
				\$
				\$
				\$
4. Total only this Page			\$	0.00
5. Total of ALL CRO-1510 Pages			\$	27.00
(This line must be on line 17 of Detailed Summary Page CRO-1100)			Φ	21.00